
SFY 2012 Regional Funding Plan

La Paz/Mohave Regional
Partnership Council

Date 11/10/2010
Submitted to the
First Things First State Board
for January 24-25, 2011

**LA PAZ/MOHAVE REGIONAL PARTNERSHIP COUNCIL
FUNDING PLAN SFY 2012
July 1, 2011 – June 30, 2012**

I. Regional Council Funds Available

II. Review of Regional Funding Plan and Planning for 2012

- Progress with Funding Plan and 2012 strategy planning
- Budget
- Changes in funding levels for strategies from 2011 to 2012

III. System Building Plan

Appendix

- New Strategy Worksheets

Section I

Regional Allocation Summary

The following chart shows the total available funds to the Regional Council, by funding sources.

Allocations and Funding Sources	SFY 2010	SFY 2011	SFY 2012
Population Based Allocation	\$2,695,430.00	\$2,240,879.00	\$2,238,390.00
Discretionary Allocation	\$1,484,320.00	\$1,289,137.00	\$1,315,120.00
Other (FTF fund balance addition)		\$491,278.83	\$432,106.00
Additional Income (other than FTF tobacco tax)	\$0.00	\$0.00	\$0.00
Carry Forward from Previous Year		\$1,598,486.71	\$1,097,330.17
Total Regional Council Funds Available	\$4,179,750.00	\$5,619,781.54	\$5,082,946.17

Section II

Progress with SFY 2010 and 2011 Funding Plans And SFY 2012 Planning

For 2012 planning, Regional Councils are asked to review the strategies from years prior while they consider direction for SFY 2012. At their September 2010 meeting, the First Things First Board adopted priorities as were recommended by the Arizona Early Childhood Task Force. Following is the list of five priorities for First Things First action within the next one to three years. These are the roles for which FTF will establish measurable benchmarks and devote resources in order to achieve results for Arizona's young children and their families. These priorities are services which could be funded at both state and regional levels. Throughout this 2012 Regional Funding Plan, there are references to these new priorities. They are:

Quality, Access, and Affordability of Regulated Early Care and Education Settings - Convene partners, provide leadership, and provide funding for increased availability of and access to high quality, regulated, culturally responsive, and affordable early care and education programs.

Supports and Services for Families - Convene partners, provide leadership, provide funding, and advocate for development, enhancement, and sustainability of a variety of high quality, culturally responsive, and affordable services, supports, and community resources for young children and their families.

Building Public Awareness and Support - Convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.

Professional Development System - Convene partners, provide leadership, and provide funding for the development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.

Access to Quality Health Care Coverage and Services - Collaborate with partners to increase access to high quality health care services (including oral health and mental health) and affordable health care coverage for young children and their families.

In addition, the Task Force recommended that FTF take a leadership role in three priorities that focus on program and process development at the state level. These are:

Early Childhood System Funding – Secure, coordinate, and advocate for resources required to develop and sustain the early childhood system. [This does not mean that FTF would be the sole funder of the early childhood system, but would take an active role in helping to increase and coordinate available resources.]

Early Care and Education System Development and Implementation - Convene partners and provide leadership in the development and implementation of a comprehensive early care and education system that is aligned both across the spectrum of settings and with the full continuum of the educational system.

Quality Early Care and Education Standards, Curriculum, and Assessment - Convene partners, provide leadership, and provide funding for the development and implementation of quality standards for early childhood care and education programs and related curricula and assessments. [This is integral to improving the quality of early care and education settings.]

Section II A

The table below provides a summary of the Regional Partnership Council's prioritized needs and strategies for SFY 2012, as well as information on progress in SFY 2010 and SFY 2011.

PRIORITY NEED 1: Quality, Access, and Affordability of Regulated Early Care and Education Settings						
Description: There is a need for more affordable, high-quality and accessible early care and education in the region.						
Strategy: Expansion: Pre-Kindergarten						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Increased slots for participating children	0	N/A	0	80	100	120
Strategy: Expansion: Increase slots and/or capital expense						
Regional Title and/or short description: Planning, Access and Quality Grants						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Centers	15	15	15	16	16	16
Homes	10	10	10	10	10	10
Strategy: Quality First						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Centers	10	10	10	9	9	9
Homes	0	0	0	1	1	1
Strategy: Child Care Scholarships (Emergency)						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10	FY 10	FY 10	FY 11	FY 11	FY 12

	Target	Contracted	Actual	Target	Contracted	Target
Children	249	249	249	0	0	0
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction						
1. Strategy Success Agreements for Pre-Kindergarten expansion are in place with 4 school districts to serve 80 children. Twenty-six expansion grants were awarded in SFY 2010: two planning grants, seven start-up grants, and seventeen quality improvement grants. Through these grants, three new in-home programs were started, two centers expanded to serve infants and toddlers and one home expanded to serve children with disabilities. Also, 18 programs in the region are participating in the Quality First Program.						
2. Strategy Challenges Quality First implementation has been challenging due to delays in getting an agreement in place to provide Child Care Health Consultation and a reluctance on the part of early childhood professionals in the region to participate in TEACH. These challenges are being addressed. The CCHC is now hired and outreach to encourage more QF providers to enroll in TEACH is ongoing.						
3. Strategy Changes for 2012 Increase in funding for Pre-Kindergarten Expansion will allow the region to add another school district and serve more children.						
4. First Things First Priorities These strategies address Quality, Access, and Affordability of Regulated Early Care and Education Settings – The FTF Statewide Priority to convene partners, provide leadership, and provide funding for increased availability of and access to high quality, regulated, culturally responsive, and affordable early care and education programs.						
PRIORITY NEED 2: Supports and Services for Families						
Description: There is a need to raise awareness of the importance of early childhood and a parent's role in supporting health and development.						
Strategy: Home Visitation						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Children	427	427	311	283	344	283
Strategy: Court Teams						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Children	100	100	100	160	304	160

Strategy: Food Insecurity						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Families	TBD	N/A	11,824	0	0	TBD
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction						
1. Strategy Success The Court Team strategy has had enormous success at reaching professionals region-wide to provide very high-quality training on infant and toddler mental health that has not previously been available in the region. In SFY 2010, 23 trainings were held with an average attendance of 34 professionals.						
2. Strategy Challenges Coordination and systems to better define service areas, referral procedures and roles of home visiting providers in the region is a challenge that has been identified. This need is being addressed through Grantee Coordination meetings convened by the Regional Coordinator every other month. Also, in some cases target service numbers were not reached due to a lack of capacity to recruit qualified staff.						
3. Strategy Changes for 2012 The Food Insecurity strategy will be re-funded in 2012 to address the ongoing issue of hunger in children ages birth through five and their families. (See New Strategy Worksheet page 17.)						
4. First Things First Priorities These strategies address Supports and Services for Families – The FTF Statewide Priority to convene partners, provide leadership, provide funding, and advocate for development, enhancement, and sustainability of a variety of high quality, culturally responsive, and affordable services, supports, and community resources for young children and their families.						
PRIORITY NEED 3: Access to Quality Health Care Coverage and Services						
Description There is a need to increase access to high quality health care services (including prenatal, oral and mental health services) and affordable health coverage for young children and their families.						
Strategy: Developmental and Health Screening						
Regional Title and/or short description Preventive Health Outreach and Screening						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Children	462	462	402	616	416	616
Strategy: Therapist Recruitment (New Strategy in 2012)						
Regional Title and/or short description: None						

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Therapists	0	0	0	0	0	3
Strategy: Child Care Health Consultation						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Centers	30	0	0	30	9	30
Homes	0	0	0	0	1	0
Strategy: Mental Health Consultation						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Mental Health Providers	0	0	0	10	9	9
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction						
1. Strategy Success The Developmental Screening and Infant Toddler Mental Health Strategies were close to meeting their targets in SFY 2010.						
2. Strategy Challenges There were significant delays in getting an agreement in place to provide Child Care Health Consultation. Now that the consultant is hired and trained, it is anticipated that the service numbers for this strategy in SFY 2011 will be much closer to the target.						
3. Strategy Changes for 2012 A new Therapist Recruitment strategy will be added in SFY 2012 to address the critical shortage of therapists in the region. (See New Strategy Worksheet page 15.)						
4. First Things First Priorities These strategies address Access to Quality Health Care Coverage and Services – The FTF Statewide Priority to collaborate with partners to increase access to high quality health care services (including oral health and mental health) and affordable health care coverage for young children and their families.						

PRIORITY NEED 4: Professional Development System						
Description There is a need for an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.						
Strategy: Community-Based ECE Training						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Providers	135	345	615	200	200	200
Strategy: TEACH						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Scholars	50	n/a	18	60	38	20
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction						
1. Strategy Success The Community-Based Training program provided 24 trainings in SFY 2010 with an average of 27 professionals attending each session.						
2. Strategy Challenges Outreach to enroll scholars in the TEACH program has been challenging in the region due to a variety of factors, including: the large geographic area and the location of the Specialist outside the region; reluctance on the part of professionals in the region to enroll in college courses; and a lack of availability of CDA coursework in the region. It has taken time to address these issues as they have come up.						
3. Strategy Changes for 2012 None						
4. First Things First Priorities These strategies address Professional Development System – The FTF Statewide Priority to convene partners, provide leadership, and provide funding for the development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.						
PRIORITY NEED 5: Building Public Awareness and Support						
Description There is a need to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.						
Strategy: Community Outreach						

Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Champions	TBD	n/a	TBD	TBD	n/a	TBD
Strategy: Community Awareness						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Champions	TBD	n/a	TBD	TBD	n/a	TBD
Strategy: Media Campaign						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Champions	TBD	n/a	TBD	TBD	n/a	TBD
Summary of Progress and Challenges						
Rationale for Changes to SFY12						
Alignment with Strategic Direction						
1. Strategy Success						
The Community Outreach Liaison has reached XX Champions and made XX presentations.						
2. Strategy Challenges						
The decision was made to not fund additional media in the region due to a lack of data on impact specific to the region and the need for more personal contact and outreach to build relationships.						
3. Strategy Changes for 2012						
The elimination of funding for the media campaign will allow the region to evaluate the results from the Fall 2011 campaign prior to allocating further resources to media.						
4. First Things First Priorities						
These strategies address Building Public Awareness and Support – The FTF Statewide Priority to convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.						
PRIORITY NEED 6: Needs and Assets						
Description: There's a need for reliable regional data to inform decision-making and facilitate strategic						

planning in the region.						
Strategy: Needs and Assets						
Regional Title and/or short description: None						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
n/a	n/a	n/a	n/a	n/a	n/a	n/a
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction						
1. Strategy Success The 2010 Regional Needs and Assets Assessment provided qualitative data and analysis on the strengths and opportunities in the outlying areas of the region that was not previously available.						
2. Strategy Challenges None.						
3. Strategy Changes for 2012 None.						
4. First Things First Priorities This strategy addresses Early Childhood System Funding – The FTF Statewide Priority to secure, coordinate, and advocate for resources required to develop and sustain the early childhood system.						

Section II B

Budget: Regional Council Strategy Allotments

					2012 Proposed Allotments
	2010		2011		2012
FY Allocation	\$4,179,750.00		\$4,021,291.83		\$3,985,616.00
Carry Forward From Previous Year	na		\$1,598,486.71		\$1,097,327.17
Total Funds Available	\$4,179,750.00		\$5,619,778.54		\$5,082,943.17
Strategies	Allotted	Expended	Allotted	Awarded	Proposed
Expansion: Pre-K and Head Start	\$0.00	\$0.00	\$600,000.00	\$480,000.00	\$744,000.00
Expansion: Increase slots/capital expense	\$251,896.00	\$228,104.95	\$302,275.00	\$302,275.00	\$302,275.00
Quality First	\$217,377.00	\$101,168.84	\$271,556.13	\$271,556.13	\$225,000.00
Child Care Scholarships	\$685,414.00	\$699,339.00	\$0.00	\$0.00	\$0.00
Home Visitation	\$1,185,896.00	\$892,929.01	\$1,254,588.00	\$1,170,052.00	\$1,254,588.00
Court Teams	\$300,000.00	\$157,787.60	\$450,000.00	\$450,000.00	\$450,000.00
Food Insecurity	\$102,000.00	\$80,529.65	\$0.00	\$0.00	\$102,000.00
Developmental & Health Screening	\$238,533.00	\$194,752.21	\$325,231.50	\$325,231.50	\$325,232.00
Therapist Recruitment	\$0.00	\$0.00	\$0.00	\$0.00	\$225,090.00
Child Care Health Consultation	\$153,333.00	\$0.00	\$153,333.00	\$145,207.80	\$160,000.00
Mental Health Consultation (PD)	\$0.00	\$0.00	\$100,000.00	\$94,773.36	\$100,000.00
Community-Based ECE Training	\$384,525.00	\$195,615.95	\$461,430.00	\$461,430.00	\$461,430.00
Scholarships TEACH	\$193,690.00	\$20,186.08	\$131,030.00	\$131,030.00	\$99,000.00
Community Outreach	\$0.00	\$0.00	\$100,000.00	\$96,223.43	\$100,000.00
Community Awareness	\$0.00	\$0.00	\$20,000.00	\$4,766.37	\$50,000.00
Media	\$0.00	\$0.00	\$142,682.00	\$138,234.31	\$0.00
Needs and Assets	\$38,700.00	\$10,850.00	\$17,188.47	\$13,835.96	\$38,700.00
Evaluation	\$0.00	\$0.00	\$160,735.55	\$160,735.55	\$0.00
Child Care Study	\$0.00	\$0.00	\$16,446.62	\$16,446.62	\$0.00
Children's Budget	\$0.00	\$0.00	\$1,547.53	\$1,547.53	\$0.00
Parent Kits - Study	\$0.00	\$0.00	\$7,947.25	\$0.00	\$0.00
Arizona Health Survey	\$0.00	\$0.00	\$6,460.32	\$6,460.32	\$0.00
2012 Evaluation	\$0.00	\$0.00	\$0.00	\$0.00	\$186,466.00
Total	\$3,751,364.00	\$2,581,263.29	\$4,522,451.37	\$4,269,805.88	\$4,823,781.00
Carry Forward to Following Year		\$1,598,486.71	\$1,097,327.17		\$259,162.17
All figures for 2010 and 2011 are reported from FTF Program and Grants Management System. Items indicated in RED FONT in 2011 are modified from PGMS, as they are currently proposed for changes, pending Board approval.					

Provide information about changes in funding level for strategies from 2011 to 2012

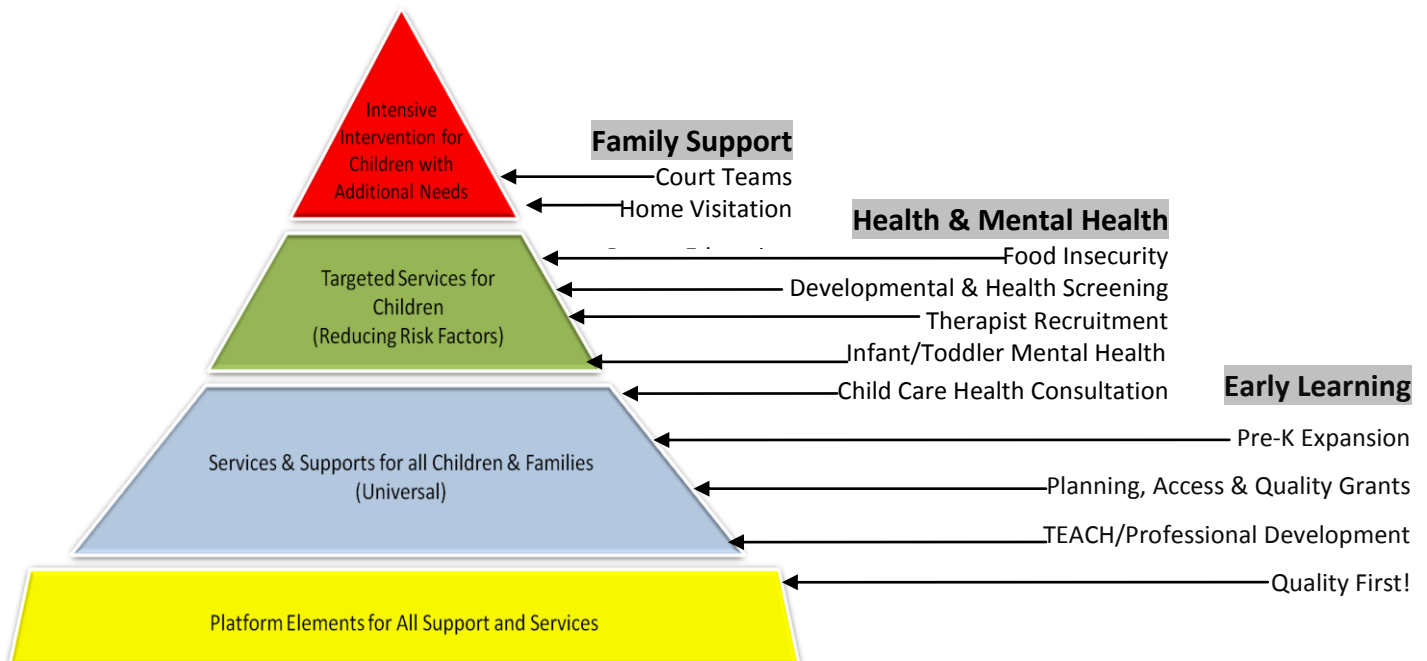
Strategy Name	Previous Funding Amount (SFY 2011)	New Funding Amount (SFY 2012)	Rationale for Change in Funding
Expansion: Pre-Kindergarten	\$600,000	\$744,000	To increase service numbers
Community Awareness	\$20,000	\$50,000	To purchase additional parent education materials, leave behinds and event sponsorships.
Media	\$142,682.00	0	To allow more time to judge the impact in the region of the first media campaign prior to adding additional funds

Section III

System Building Impact

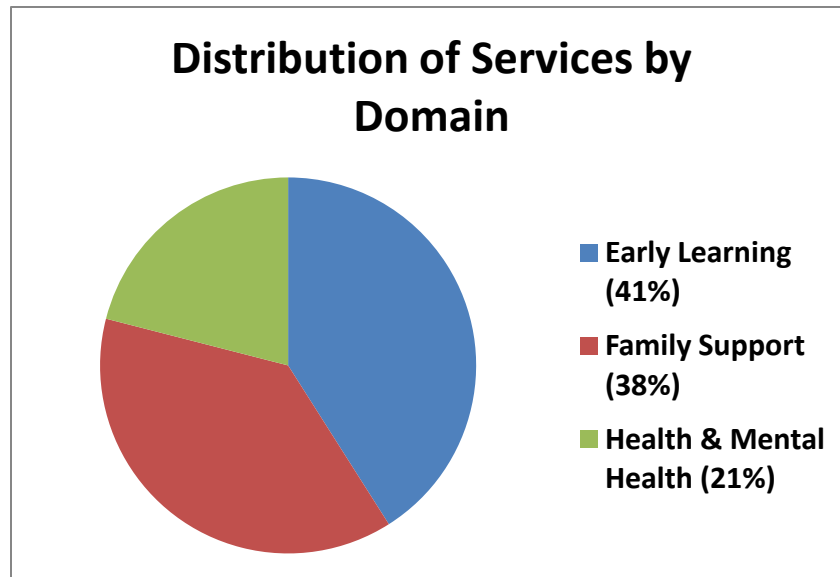
The La Paz/Mohave Regional Council recognizes that all families need access to universal services and supports, such as quality child care, and that vulnerable children and families also need more targeted and/or intensive services, such as home visiting, to address risk factors and support optimal development and health. The Regional Council envisions an early childhood system that provides a continuum of services and supports, from universal to targeted and intensive, across three domains: Family Support; Health & Mental Health; and Early Learning. The intent of the Regional Council in building this system is to be responsive to the varying needs of young children and families across the region's large geography.

The pyramid model below was used during strategic planning in order to map strategies and inform discussion on the likely impact of the collective strategies in the plan.



Considering the early stage in the program implementation process, the Regional Council determined the need to maintain the priorities established in SFY 2010 for another year. Over the past year, the Regional Council has worked together with grantees and Stakeholders to further develop and refine the strategies required to reach our common goals. Great progress has been made in building the partnerships and relationships necessary to implement programs in each of the three domains (Family Support, Health/Mental Health, and Early Learning). The important work of connecting and growing services across domains into a comprehensive and coordinated system is ongoing.

As noted in the pie chart below, the proposed SFY 2012 plan allocates funding relatively evenly between the Early Learning (41%), Family Support (38%) and Health and Mental Health (21%) domains. This is reflective of the Regional Council's belief that each domain is equally important and the subsequent decision to distribute resources equitably between them. From its inception, it has been the intent of the La Paz/Mohave Regional Partnership Council to provide a wide variety of services that promote early learning and support the overall health and well-being of all young children and families region-wide.



The Regional Council's intent with the Early Learning strategies is to build a foundation of learning for all children in the region. Quality First and T.E.A.C.H. Arizona expansion will build the capacity of the early childhood workforce to provide quality early education. Considerable evidence suggests that more capable and qualified professionals will provide improved care for children resulting in better developmental outcomes. Pre-Kindergarten Expansion and Child Care Planning, Access and Quality Grants will address the critical issue of access and affordability, particularly in under-served areas and communities where known shortages exist.

Home Visitation and Court Teams for Maltreated Infants and Toddlers are the primary strategies in the Family Support domain. These services are targeted to families with certain risk factors, including first-time mothers and families involved in the child welfare system. The intent is to stabilize the family, prevent child abuse and neglect, and provide information and resources based on the needs of the

family. A small amount of funding in the Family Support domain is also allocated to Community-Based Parent Education Programs including Fatherhood Now and Parenting Children with Special Needs.

The intent with the Health and Mental Health strategies is to connect children and families in the region who are frequently isolated, lack transportation, and live in families and communities with severely limited resources, with appropriate information, resources, referrals, and services to meet their needs. Because innovative approaches are necessary to reach the most vulnerable children and families, significant resources are allocated to strategies designed to serve families who may opt-out of more traditional child care and health care settings for a variety of reasons. Court Teams for Maltreated Infants and Toddlers, Home Visitation and Developmental and Health Screening are strategies that will reach families where they are to mitigate risk factors.

Court Teams for Maltreated Infants and Toddlers is also a coordination strategy. This strategy supports the Mohave County Children's Action Team to bring together a cross-disciplinary team of child welfare professionals from across La Paz and Mohave Counties, including the Colorado River Indian Tribe (CRIT) and the Fort Mojave Indian Tribe, on a monthly basis. The team includes those involved in the court system, Child Protective Services (CPS), foster parents and Court Appointed Special Advocates (CASAs), and other health, mental health and early intervention service providers. The Court Team leads a variety of efforts related to system coordination and collaboration including: 1) Coordinating essential services related to health, development, and social-emotional needs of young children, birth to age five, in the child welfare system; 2) Providing ongoing specialized training in child development and infant and toddler mental health to court team members and other child-serving agencies region-wide; and 3) Identifying opportunities to improve service delivery and outcomes for vulnerable families.

Improving the coordination and communication of early childhood services in the region is critical. Many Stakeholders note in their quarterly data submissions that services in the region are fragmented and families are often not aware of existing services. In SFY 2010, the Regional Council began to address this need by convening Stakeholders for a variety of work sessions, including strategic planning, capacity building, and FTF grantee orientations. In SFY 2011, the Regional Council utilized the Regional Coordinator to convene grantees for Grantee Coordination Meetings every other month.

None of the strategies in the current plan are funded at the level necessary to reach every member of the target population at this time. For example, there are 95 regulated child care providers in the region eligible to participate in Quality First. Statewide funding provides eight slots for Quality First and regional funding allows an additional nine centers and one home to enroll. Thus, the total number of Quality First slots is 18 of a possible 95 providers (19%). The intent of the Regional Council is to continuously use data on the impact strategies have to evaluate progress and eventually determine how and when strategies should be taken to scale.

It is important to note that the Regional Council anticipates continued funding for its priority programs in SFY 2013. This will be possible due to the use of carry forward from SFY 2012 along with the planned end of allotments for short- term strategies, including food insecurity and therapist recruitment.

New Strategy: Recruit and retain a ready, educated, bilingual, skilled workforce for speech/language and occupational and physical therapies in La Paz and Mohave Counties.

The La Paz/Mohave Regional Partnership Council intends to attract therapists to work with children ages birth through five in the region. There is a critical shortage of therapists with the necessary education and expertise to address the special developmental needs of children ages birth through five in La Paz and Mohave Counties. Many families in the region travel long distances to receive services or wait for extended periods of time before a contracted specialist (certified to work with children birth through five) can come to them.

According to the 2010 Regional Needs and Assets Report, key informants and parents alike cited a lack of available therapeutic services for children with special needs, either because of an absence of providers or because of the need to travel long distances to obtain services. Key informants from the provider community cited difficulty in hiring therapists for open positions. The low population density in the area, and the generally low wage structure, are serious barriers to recruiting and retaining highly skilled and in-demand medical and developmental specialists. The limited infrastructure for general medical care in the more remote areas of the region is another substantial hurdle.

This strategy is intended to provide an incentive/bonus to recruit four therapists to live and work in the La Paz/ Mohave Region. Incentives will include repayment of student loans, sign-on bonuses, moving expenses, and annual service completion bonuses for up to two years. Speech/Language Pathologists, Occupational Therapists and Physical Therapists are eligible. There is also a particular interest in recruiting bilingual therapists to work in the region.

This strategy will be administered by the Arizona Department of Health Services. The two-year incentive package will require therapists to commit to at least a 24-month service obligation working with children ages birth through five in the region. The La Paz/Mohave Regional Council and the Colorado River Indian Tribe Regional Council will collaborate on this strategy by sharing the cost to recruit a single therapist to serve both regions in Parker and La Paz County.

Lead Goal: FTF will advocate for timely and adequate services for children identified through early screening.

Goal: FTF will build skilled and well-prepared early childhood development workforce.

Key Measures:

1. Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health.

Target Population: Region-wide

	SFY 2011	SFY 2012	SFY 2013
Proposed Service Numbers	0	4	0

Performance Measures SFY 2010-2012:

1. # of providers of specialized services serving children birth through 5

SFY2010 Expenditure Plan for Proposed Strategy					
Population-based Allocation for proposed strategy				Estimated: \$225,090	
Budget Justification:					
The incentive package to recruit 4 therapists to the region will include both loan repayment and stipend for three years. Estimated costs are as follows:					
<u>Cost of Loan Repayment for 4 Therapists for 2 Years:</u>					
	Year 1	Year 2	Total Cost		
CRIT/La Paz Physical Therapist	\$15,000	\$20,000	\$35,000		
Mohave Physical Therapist	\$15,000	\$20,000	\$35,000		
Speech Language Pathologist	\$10,000	\$15,000	\$25,000		
Occupational Therapist	\$10,000	\$15,000	\$25,000		
Total Cost	\$50,000	\$70,000	\$120,000		
<u>Cost of Stipends Per Therapists for 2 Years (CRIT Regional Council is paying the Stipend for 1 Therapist):</u>					
Moving Expenses	Sign- on Bonus	12 Month Service Completion	24 Month Service Completion	Additional Incentives (Professional Memberships, License Fees)	Total Cost
\$3,000	\$3,000	\$5,000	\$7,500	\$2,500	\$21,000
Total estimated expenses:					
2 Years of Loan Repayments for 4 therapists: \$120,000					
2 Years of Stipends for 3 therapists: \$63,000					
Administration/Recruiting/Indirect Costs at 23% of total cost: \$42,090					
TOTAL COST: \$183,000 + \$42,090 = \$225,090					

New Strategy: Food Insecurity

The First Things First Board previously recognized and responded to the hardships endured by families due to the economy's current state of crisis. In SFY 2010, the La Paz/Mohave Regional Partnership Council supplemented the economic response efforts initiated by the Board and allocated regional funding to provide emergency food boxes to families with children ages birth through five in the region.

Hardships for families in the region have continued and are exacerbated by the isolated location of some of the region's outlying areas, which places families in potentially devastating situations. Often parents do not have the resources to provide adequate food and nutrition for their children, leaving them hungry, insecure of their next healthy meal, and at risk for poor development.

Research has shown that even moderate under-nutrition, the type seen most frequently in the United States, can have lasting effects on the brain development of children. According to the Center on Hunger and Poverty, inadequate nutrition is a major cause of impaired cognitive development, and is associated with increased educational failure, elevated occurrence of health problems, and higher levels of aggression, hyperactivity, and anxiety among impoverished children.

The Regional Partnership Council has determined that the families in the region continue to experience financial hardship and food insecurity, and because eating patterns are formed early in life and may be carried into adulthood, healthy eating habits need to be developed early. The Regional Partnership Council has put forth a strategy for supporting families in need of emergency food assistance and referral to resources to assist families in obtaining stability in their children's lives.

The food assistance provided with this strategy must be nutritious and follow the Food Guide Pyramid. Additionally, the success of this strategy will require coordination with: 1) family support and nutrition programs in the region to ensure the community's resources are maximized, and 2) the WIC program to ensure access to a nutritious diet for all pregnant women and their babies. The Food Assistance and Nutrition provider will need to develop a partnership with WIC to make certain that mothers are first receiving support and infant formula through WIC resources and that First Things First funding does not supplant services currently available or covered by existing federal funding or other existing sources.

Lead Goal: Coordinate and integrate with existing education and information systems to expand families' access to high quality, diverse and relevant information and resources to support their child's optimal development.

Goal: Collaborate with existing Arizona early childhood health care systems to improve children's access to quality health care.

Key Measures:

Percentage of families with children birth through age five who report they are competent and confident about their ability to support their child's safety, health, and well-being.

Target Population:

The region's children birth through age five and their families experiencing food insecurity.

	SFY 2011	SFY 2012	SFY 2013
Proposed Service Numbers	0	4,080 food boxes	0

Performance Measures:

1. Number of children provided with food assistance/Proposed service #
2. Number of parents who received education on nutritional needs or financial literacy/ Proposed service #
3. Percent of children living in the region who are facing food insecurity
4. Number and percent of pregnant women and children served by WIC in the region

SFY 2011 Expenditure Plan for Proposed Strategy

Allocation for proposed strategy	\$102,000
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Budget Justification:

Cooperative food purchasing programs provide a variety of food packages that range in costs from \$15 - \$35 per food box. For purposes of budgeting, an average cost of \$25 per box was utilized.